MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/53/295 APPLICANT(S)

FILING DATE

CLAIMS

غي ده	AS FILED		AFTER 1° AMENDMENT		AFTER 2 MANENDMENT			AS F		ILED	AFTER		AFTER 2 AMENDMENT	
	IND.	DEP.		DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1				-				51						
3	_ · · · · ·		}					52						
4								53 54						
5								55						
6				1				56						
7								57						
- 8				1				58						
9								59						
10 11				-				60						
12	<u> </u>			-				61 62						
13				1			:	63						
14								64						
15								65						
16								66						
17								67						
18								68						
19 20				\vdash			ŀ	69 70						
21				'				71						
22							1	72						
23								73						
24								74						
25								75						
26							ı	76						
27 28							1	77 78						
29							·	79						
30							Ì	80						
31							Ī	81						
32								82						
33							1	83						
34							ŀ	84 85						
35 36							F	86						
37							ŀ	87				·		
38							t	88						
39							[89						
40								90						
41		·						91						
42								92 93						
43 44	——-				-		ŀ	93						
45							ŀ	95						
46							ľ	96						
47								97						
48								98						
49]		99						
50							 	100				 -		
TOTAL IND.	j	+	4	+		*	- 1	TOTAL IND.		*		*		*
TOTAL DEP		+	24	+		+	Ŀ	TOTAL DEP		(*	· · · · · ·	+		(-
TOTAL CLADES			28					TOTAL CLAIMS						
PTO - 1364	(REV. 11/04)										MENT of CO		·	